

Rec'd PCT/PTO 26 SEP 2005

PTO/SB/01 (08-03)

Approved for use through 07/31/2008. OMB 0851-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 502424.111088

First Named Inventor Niels Hald Pedersen

COMPLETE IF KNOWN

Application Number 10/530,769

Filing Date

Art Unit

n/a

Examiner Name

n/a

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A SYSTEM AND A METHOD OF AUTOMATICALLY SORTING OBJECTS

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/10/2003 as United States Application Number or PCT International

Application Number PCT/DK03/00685 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Copy Attached?	
			Yes	No	Yes	No
PA 2002 01548	Denmark	10/11/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <u>29540</u> OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<u>Niels Hald</u>		<u>Pedersen</u>	
Inventor's Signature <u>X Niels Hald Pedersen</u>		Date <u>X 12/4-2005</u>	
Residence: City	State	Country	Citizenship
<u>Hvidovre</u>	<u>DKX</u>	<u>Denmark</u>	<u>Danish</u>
Mailing Address <u>Gadestaevnet 52, DK-2650 Hvidovre, Denmark</u>			
City	State	ZIP	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<u>Jesper</u>		<u>Cramer</u>	
Inventor's Signature <u>X Jesper Cramer</u>		Date <u>X 12/4-05</u>	
Residence: City	State	Country	Citizenship
<u>Vanlose</u>	<u>DKX</u>	<u>Denmark</u>	<u>Danish</u>
Mailing Address <u>Clausholmvej 8, DK-2720 Vanlose, Denmark</u>			
City	State	ZIP	Country
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

[Page 2 of 2]

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PTO/SB/02A (08-03)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
Page _____ of _____	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Anders		EVALD	
Inventor's Signature <i>X</i> <i>Anders Evald</i>		Date <i>X</i> 12/4/2005	
Residence: City	State	Denmark	Danish
Birkeroed	DKX		Citizenship
Andedammen 14, DK-3460 Birkeroed, Denmark			
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mikiko		Gokano	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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10/530769

PTO/SB/81 (06-04)

Approved for use through 11/30/2005, OMB 0651-0035

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/530,769
Filing Date	
First Named Inventor	Niels Hald PEDERSEN
Title	A System and a Method of ...
Art Unit	n/a
Examiner Name	n/a
Attorney Docket Number	502424.111088

I hereby appoint:

☒ Practitioners associated with the Customer Number:

29,540

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☒ The address associated with Customer Number:

29,540

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Gerald Levy				
Address	Pitney Hardin LLP				
Address	7 Times Square				
City	New York	State	NY	Zip	10036-7311
Country	USA				
Telephone	212-297-5800	Fax	212-916-2940		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record (if assignee, put name, title and company name in the "Name" space below)

Name	Niels Hald Pedersen		
Signature	<i>Niels Hald Pedersen</i>		
Date	12/4-2005	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☒ The address associated with Customer Number:

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OR

☒ Firm or Individual Name: Gerald Levy

Address: Pitney Hardin LLP

Address: 7 Times Square

City: New York

State: NY

Zip: 10036-7311

Country: USA

Telephone: 212-297-5800

Fax: 212-916-2940

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)

SIGNATURE of Applicant or Assignee of Record (if assignee, put name, title and company name in the "Name" space below)

Name: Jesper Cramer

Signature: *Jesper Cramer*

Date: 12/4-2005

Telephone:

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Attorney Docket Number	502424.111088

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29,540

OR

☐ Practitioner(s) named below:

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OR

☒ The address associated with Customer Number:

29,540

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Gerald Levy				
Address	Pitney Hardin LLP				
Address	7 Times Square				
City	New York	State	NY	Zip	10036-7311
Country	USA				
Telephone	212-297-5800	Fax	212-916-2940		

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record (If assignee, put name, title and company name in the "Name" space below)

Name	Anders Evald		
Signature	<i>Anders Evald</i>		
Date	12/4/2005	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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